

OMB APPROVAL

OMB Number: 3235-0076 Expires: April 30, 1991 Estimated average burden Hours per response...16.00

SEC USE ONLY							
Prefix		Serial					
DAT	TE RECEIV	/ED					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Common Stock offering
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ☐ Rule 506 ☐ Section 4(6) ☐ ULOE
Type of Filing: New Filing Amendment
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) Uranium Resources, Inc. 04029181
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) 650 S. Edmonds Lane, Suite 108, Lewisville TX 75067 (972) 219-3330
Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (if different from Executive Offices)
Brief Description of Business PROCESSES
(if different from Executive Offices) Brief Description of Business Uranium Mining Development MAY 07 2004
Type of Business Organization Meanway Colored Specific (Specific Colored Specific Colored
© corporation ☐ limited partnership, already formed ☐ other (please specify): ☐ business trust ☐ limited partnership, to be formed ☐
Actual or Estimated Date of Incorporation or Organization: Month Year
CN for Canada; FN for other foreign jurisdiction)

A. BASIC IDENTIFICATION DATA 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner George R. Ireland Full Name (Last name first, if individual) One International Place, Suite 2401, Boston, Massachusetts 02110-2633 Business or Residence Address (Number and Street, City, State, Zip Code) Promoter Beneficial Owner Executive Officer □ Director General and/or Check Box(es) that Apply: Managing Partner Paul K. Willmott Full Name (Last name first, if individual) 650 S. Edmonds Lane, Suite 108, Lewisville TX 75067 Business or Residence Address (Number and Street, City, State, Zip Code) Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Check Box(es) that Apply: Managing Partner Leland O. Erdahl Full Name (Last name first, if individual) 279 Cielo Azul, Corrales, NM 87048 Business or Residence Address (Number and Street, City, State, Zip Code) Executive Officer General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or ☐ Beneficial Owner ☐ Director Check Box(es) that Apply: Promoter Managing Partner Thomas H. Ehrlich Full Name (Last name first, if individual) 650 S. Edmonds Lane, Suite 108, Lewisville TX 75067 Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner □ Executive Officer General and/or Check Box(es) that Apply: Promoter Director Managing Partner Richard A. Van Horn Full Name (Last name first, if individual) 650 S. Edmonds Lane, Suite 108, Lewisville TX 75067 Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director ☐ General and/or Managing Partner Mark S. Pelizza Full Name (Last name first, if individual) 650 S. Edmonds Lane, Suite 108, Lewisville TX 75067 Business or Residence Address (Number and Street, City, State, Zip Code)

					B.	INFORM	ATION AE	BOUT OFF	ERING					
1. 1	Has th	ne issuer s	old, or does	the issuer i	ntend to se	ll, to non-a	ccredited in	vestors in t	his offering	?,			Yes □	\boxtimes
					Answer al	so in Appe	ndix, Colun	an 2, if filir	ig under UL	OE.				
2.	What	is the min	imum inves	stment that	will be acco	epted from	any individ	ua1?	• • • • • • • • • • • • • • • • • • • •				\$3	,000
3. !	Does t	the offerir	ig permit jo	int ownersh	ip of a sing	gle unit?				••••••			Yes ⊠	No
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth information for that broker or dealer only.														
Full	Name	e (Last na	me first, if	individual)								······································		· · · · · · · · · · · · · · · · · · ·
Non		or Reside	ice Address	(Number a	nd Street.	City, State,	Zip Code)							
N/A					,	, ,,	,							
		Associate	Broker or	Dealer										
N/A		Mhigh Day	oon Listed	Has Solicite	d or Intere	le to Calieit	Durchosars	·						
				individual									☐ Ail	States
														States
[1]	AL] L] MT]	[AK] [IN] NEI	[AZ] [IA] [NV]	[AR] [KS] [NH]	[СА] [КҮ] [NЛ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[H]] [MS] [OR]	[ID] [MO [PA]	
[F	U] [[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]	
Non		e (Lasi na	ine mst, n	marviduarj										
		or Reside	nce Address	(Number a	ind Street,	City, State,	Zip Code)							
N/A Nan		Associate	d Broker or	Dealer										
N/A														
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				ndividual St									All Si	ates
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Full	Name	e (Last na	me first, if	individual)										
Nor Bus		or Reside	nce Address	s (Number a	and Street,	City, State,	Zip Code)							
N/A		,												
		Associate	d Broker or	Dealer										
N/A Stat		Which Pe	rson Listed	Has Solicite	ed or Intend	ds to Solicit	Purchasers							
(Ch	eck "A	All States'	or check in	ndividual Si	ates)					****************		[] All S	tates
1]	AL] L] MT] RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MC [PA] [PR]	1
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_	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USI	O S	F PROCEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box: and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		Aggregate	Amount Algorit
Ту	pe of Security		Aggregate Offering Price	Amount Already Sold
	Debt	\$_	-0-	\$0-
	Equity	\$_	5,897,552	\$ 4,872,050
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$_	-0-	\$0-
	Partnership Interests	\$_	-0-	\$0-
	Other (Specify).	\$_	-0	S <u>-0-</u>
	TotalAnswer also in Appendix, Column 3, if filing under ULOE.	\$_	5,897,552	\$_4,872,050
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
			Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors		30	\$ 4,872,050
	Non-accredited investors		0	\$0-
	Total (for filings under Rule 504 only)		N/A	\$N/A
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Type of	Dollar Amount
	Type of Offering		Security	Sold
	Rule 505		N/A	\$ <u>N/A</u>
	Regulation A	-	N/A	\$ <u>N/A</u>
	Rule 504		N/A	\$N/A
	Total		N/A	\$ <u>N/A</u>
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		*******	S -0-
	Printing and Engraving Costs			S0
	Legal Fees.			x \$5,000
	Accounting Fees.			S0
	Engineering Fees.			S <u>-0-</u>
	Sales Commissions (specify finders' fees separately)			S0
	Other Expenses (identify) copying charges, filing fees, mailing expenses	• • • •	,	\$
	Total	,.		S 5,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C – Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer." 5,892,552 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Payments to Affiliates Others ☐ \$<u>275,000</u> \$_550,000 Salaries and fees..... □ \$<u>-0</u>-☐ \$<u>-0-</u> Purchase of real estate..... Purchase, rental or leasing and installation of machinery and equipment □ \$<u>-0-</u> □ \$<u>-0-</u> Construction or leasing of plant buildings and facilities..... □ \$<u>-</u>0-\$ 2,615,000 Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another S -0- S -0issuer pursuant to a merger)..... Repayment of indebtedness..... □ S -0-__ S__-0-_ Working capital.... S -0-\$<u>1,517,552</u> Financial Surety (Bond Collateral) S_-0-S 935,000

Column Totals.....

Total Payments Listed (column totals added).....

□ \$__-0-_

☐ \$<u>275,000</u>

\$ 5,892,552

__ [] \$ <u>-0-</u> __ [] \$ <u>5,617,552</u>

igned	bу	the	11 17	dersi	gned	d d u	ıly	auth	oriz	zed	p er:	son.	If	this	n e	otice	is	filed	lun	der	Rul	505	, 1 h	1e
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The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any

D. FEDERAL SIGNATURE

Issuer (Print or Type) Date May **3**, 2004 Uranium Resources, Inc. Name of Signer (Print or Type) Title of Signer (Print or Type) Vice President and Chief Financial Officer Thomas H. Ehrlich

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule.	Yes	No ⊠	

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer had read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature ALLON	Date
Uranium Resources, Inc.		May 3 , 2004
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Thomas H. Ehrlich	Vice President and Chief Financial Officer	r

			IX	

1	2	<u>)</u>	3			4	- May		5
	Intend to n accre invest State B-Ite	on- dited ors in (Part	Type of Security and aggregate offering price offered in state (Part C-Item 1)	Тур	e if investor and (Part	amount purchased in S C-Item 2)	tate	under Sta (if yes explant waiver	ification ate ULOE , attach ation of granted) Item 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK		!						<u></u>	
AZ		Х	Common Stock: 1,500,000	1	\$100,000	-0-	-0-		Х
AR									
CA									
СО	·								
CT		Х	Common Stock: 266,666		\$40,000	-0-	-0-		Х
DE									
DC									
FL		Х	Common Stock: 4,666,666	2	\$700,000	-0-	-0-		Х
GA									
НІ									
ID									
ΙL		х	Common Stock: 133,333	1	\$20,000	-0-	-0-		Х
IN									
IA									
KS		Х	Common Stock: 1,383,333	2	\$215,000	0	0		X
KY									
LA									
МЕ									
MD									
MA		Х	Common Stock: 1,950,000	3	\$292,500	0	0		х
Ml				,					
MN									

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	Intend to n accre invest State B-Ite	dited tors in (Part	Type of Security and aggregate offering price offered in state (Part C-Item 1)	Тур	Type if investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No		
MS	. 50	,			1,11,13,11,1				,,,,,		
МО											
МТ											
NE								 			
NV											
NH		х	Common Stock: 66,666	1	\$10,000	-0-	-0-		X		
NJ											
NM											
NY		Х	Common Stock: 35,463,666	16	\$3,369,550	-0-	-0-		X		
NC											
ND											
ОН											
OK											
OR											
PA											
RI											
SC							No. 1				
SD					,						
TN											
TX											
UT											
VT											
VA		Х	Common Stock: 166,666	1	\$25,000	-0-	-0-		Х		
WA											
WV											
WI											

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1	lntend to sell to non- accredited investors in State (Part B-item 1)		Type of Security and aggregate offering price offered in state (Part C-Item 1)	Type if investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) Part E-Item 1).	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
WY									
PR									

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